



CERTIFICATE OF RESIDENCE

County of Rensselaer (49)

City of Troy (89)

Number of months residence in New York State_____ in City of Troy_____

Last Name_____ First Name_____

Residence_____

Social Security number_____

I do hereby certify that I am now, and have been for a period of at least one-year immediately prior to the date of this application been a resident of the State of New York; and now am, or have been for a period of _____ months within the six months immediately prior to the date of this application, a resident of the City of Troy, County of Rensselaer.

As per Education Law Article 126 Section 6305, if the City of Troy refuses to issue such a certificate on the grounds that required proof of residency has not been met, you may appeal to the Chancellor of the State University. The Chancellor shall make a determination after a hearing and, upon ten days notice to the City of Troy, this determination shall be final and binding.

Signature of Applicant

Sworn to before me this

_____ day of _____ 2003

(SEAL)

**Teresa M. Kippen
Troy City Clerk**